

COMMAND FINANCIAL SPECIALIST COURSE QUOTA REQUEST FORM

This form is required for requesting quotas to the CFS Course at the Fleet and Family Support Center, NAVSTA Great Lakes, IL. This request will not be considered without all required information and the supervisor signature.

PLEASE PRINT CLEARLY OR TYPE.

NAME:(Last, First. MI:)	Rate/Rank:	PRD:	SSN:
COMMAND/DEPT/DIV:		BLDG#	Position/Title:
Command Address (include zip): and UIC		Work #:	Email: Confirmation via email
Name/Phone of Current Command Financial Specialist.		CFS class date Requested:	
<p>ATTENDEE REQUIREMENTS:</p> <p>The CFS Course is designed to assist commands in meeting the requirements of OPNAVIST 1740.5A by training qualified personnel in the area of Personal Financial Management(PFM) skills and counseling techniques. Per instruction, all USN/USNR commands having over 25 enlisted personnel shall have a trained Command Financial Specialist. Those commands with less than 25 enlisted personnel are encouraged to have a trained CFS. The qualifications and prerequisites for attending this course are:</p> <ol style="list-style-type: none"> 1. Must be E-6 or above. 2. Must be highly motivated and financially stable. 3. Must have at least one year remaining at present command. 			
<p>Upon completion of training, member will be assigned as CFS:</p> <p>Departmental Financial Specialist: _____ Divisional Financial Specialist: _____ or Other: _____</p>			
Member's previous financial/counseling training(civilian or military):			
Supervisor Signature:(Incl. Title)		Date:	
Return completed form to:		<u>PLEASE DO NOT EMAIL FORM!!</u>	
Guard Mail: Colleen Sineway Bldg. 26 FAX: (847) 688-2827	or Post Office:	Fleet and Family Support Center Colleen Sineway, FFSC Admin 525 Farragut Avenue Bldg. 26, Suite 300 Great Lakes, IL 600881	(847)688-3603x147